

POLICY BRIEF (#2)

ON NATIONAL POLICY ACTION TOWARD IMPROVED HOSPITAL MANAGEMENT AND ADMINISTRATION

Health Reform Implementation Support Group (HRISG)

Meeting Held on February 26, 2013

This policy brief documents results from the implementation of health care reform initiatives and recommends to the Minister of Health actions in two distinct areas

INTRODUCTION

In February 2012 the HRISG approved the Enabling Equitable Health Reform (EEHR) Project's proposal to start piloting a set of management and administration improvement interventions in three hospitals – Korca and Lezha regional hospitals and Tirana Maternity Hospital #1. Since then hospital teams and EEHR staff and consultants have been working to implement various interventions: hospital visitor control policy and procedures, human resources management (employee orientation, job descriptions, employee performance assessment and planning), incident reporting, medication administration, space utilization, outsourcing of non-clinical services, hospital environmental services, internal communication and public relations, customer care, and hospital autonomy.

Lessons learned from the implementation of interventions support the conclusion a national level policy action to back an improved hospital effort at the national level targeting to:

- Strengthen the accountability of health workers through improvement in selected human resource management practices;
- Improve hospital capabilities to lower hospital-acquired infection.

HUMAN RESOURCE MANAGEMENT (JOB DESCRIPTIONS)

Problem Statement: Detailed descriptions of the roles and responsibilities of each employee constitute an essential enabler of good human resource management practices, setting the base for holding employees accountable, measuring objectively their performance, planning for professional improvements, and communicating the scope of duties to peers, supervisors, and MOH. The practice observed in hospitals was for employees to have general job descriptions – for the profession of nurse, doctor or administrative staff. Such job descriptions were not individualized. They could not capture some of the essential duties of the employee. Given the absence of customization, such job descriptions could not be effective for holding employees accountable for the fulfillment of their duties, evaluating individual performance, rewording good performance based on objective criteria, or engaging in a meaningful planning of employee performance improvement. For services organizations such as hospitals, which rely overwhelmingly on their human resources for the fulfillment of their mission and

objectives, the absence of individualized job descriptions had left significant management gap impacting staff accountability, patient safety, and the overall effectiveness of operations.

Results of Intervention Implementation: EEHR, working with the regional pilot hospitals, has provided training, technical and managerial direction and support for creating job descriptions that are specific for individual hospital employees. Working together with the Human Resources Teams from the EEHR pilot hospitals, such job descriptions were created collaboratively with the employees and their supervisors. They have been signed by the employee and constitute a part of the official HR record. They serve as a basis for holding the employee accountable in the employee – supervisor relationship and will be the basis for employee performance evaluation starting from 2013.

Recommended Policy Action: Individualized job descriptions should be made a part of each employee record. Individualized job descriptions will set the basis for hospital expectations from the employee.

HUMAN RESOURCES MANAGEMENT (NEW EMPLOYEE ORIENTATION):

Problem Statement: New hospital hires need a good orientation on all key aspects of hospital organization and operations from hospital administration, management and structure to hospital policies, security issues, and fire safety and evacuation. The importance of such orientations is well-recognized and made a standard practice at hospitals around the world. Such orientation is not offered at hospitals in Albania. Introducing such orientations will provide multiple benefits. New employees will become familiar from the first days/ weeks of their hiring with all key operational aspects of the hospital. This will make employees not only more comfortable at their new workplace, but more importantly is expected to reduce mistakes, improve operational efficiencies and effectiveness, and decrease the cases of accidents related to lack of knowledge and information. Orientation also supports increased accountability.

Results of Intervention Implementation: EEHR has been assisting the three pilot hospitals in the introduction of new employee orientations. Employee orientation manuals were developed by groups of hospital employees and EEHR staff. Manuals serve as a reference guide to all hospital issues included in the orientation. The manuals were pre-tested with groups of current employees and modified to reflect various feedbacks. Orientation sessions for all current and new employees were conducted with manuals distributed to attendees. Orientation is now mandatory for all new hires. The human resource departments working in conjunction with other departments are responsible for the planning and organization of orientation sessions.

Recommended Policy Action: All hospitals should be required to develop new employee orientation manuals, conduct orientations for all existing employees and offer the orientation to all new hires from 2014.

ORGANIZATIONAL INFRASTRUCTURE FOR EFFECTIVE HOSPITAL ENVIRONMENTAL SERVICE

Problem statement: Hospital infection is the source of some of the most significant weaknesses in the public health system. This is the reason why effective measures to reduce hospital infection require the attention of policy makers. An important step in addressing the matter has been made with the publication of the National Protocol for Prevention of Hospital Infections with Order of the Minister of Health Nr. 39 of 23.01.2012. The need for working on infection prevention at hospitals is also emphasized through the NCQSA accreditation process where the existence of Infection Control Committee is a prerequisite for hospital accreditation. The ability to lower hospital infection rates is a function of improving sanitation and taking effective infection prevention measures. Introducing and sustaining such measures depends on the existence and proper functioning of Infection Control Committees, Infection Units, and Environmental Services Department, separate from the Nursing Department, with clear roles and responsibilities and rules for collaboration and information sharing.

Infection Control Committees and Infection Units exist largely on paper and sanitation services are not departmentalized as a separate functional area within the hospital.

Results of Intervention Implementation: Groups of selected hospital staff from EEHR pilot hospitals have been trained on organizing and managing hospital environmental services. With technical support from EEHR, pilot hospital teams have been developing hospital specific standards for cleanliness and inspection of sanitation and environmental issues using best international practices and Albanian regulations.

Recommended policy action:

- Hospitals must put in place effective systems to monitor and control hospital-acquired infections, and regularly assess the effectiveness of infection control programs and interventions. Hospitals should allocate sufficient resources to ensure effective functioning of hospital environmental services. Hospitals have to also implement measures that make Infection Control Units and Infection Control Committees operational and establish the sanitation function into a separate hospital department.
- Create a working group with representatives from national health care institutions to develop National Program on Infection Control inclusive of Terms of Reference for Infection Control Committees, Infection Control Units and Environmental Services Departments and other relevant documents as well as a set of measures and plans for their effective implementation that together would lead to monitoring and controlling hospital acquired infection systematically and effectively.